									Application of Docket Milliper				
PATENT APPLICATION FEE DETERMINATION RECOF									10/684 493				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	NTITY	OR	OTHER	THAN	
T	OTAL CLAIMS		12					RATE	FEE]	RATE	FEE	
FI	OR .		NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	Basic Fee	770.00	
T	OTAL CHARGE	ABLE CLAIMS	18 minus 20=					X\$ 9=		OR	X\$18=	~	
IN	DEPENDENT C	LAIMS	5 minus 3 =		2			X43=		OR	X86=	177	
M	JUTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
• If the difference in column 1 is less than zero, enter "O" in column 2								TOTAL	 	OR	TOTAL	942	
4	CLAIMS AS AMENDED - PART II (Column 2) (Column 3)								ENTITY	OR	OTHER	THAN	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH MUME PREVIO PAID I	EST BER NUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	. 5	Minus	- 2	0			X\$ 9=		OR	X\$18=		
KEE	Independent	- 1	Minus		3	•		X43-		OR	X86=		
_	FIRST PRESE	ENTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290×		
								TOTAL			TOYAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								ADDIT. FEE			RUUH. PEEI		
AMENDMENT B	11/17/15	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	-6	Minus	• 0	0_	- /		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF MIL	Minus) ~ ABA	-/-		X43=		OR	X86=		
	rinai rinees	NOTION OF MIL	LIPLE DE	CNDERT				+145=		OЯ	+290=		
								TOTAL DOIT, FEE		OR ,	TOTAL LOOIT, FEE		
_		(Column 1)		(Colum		(Column 3)							
ENT C		CLAIMS REMAINING AFTER AMENDMENT	•	NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE '	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDME	Total	· 23	Minus	• 2	0	•3	ſ	X\$ 9=		OR	X\$165	150	
	Independent	• 3	Minus	- *	5	•	I	X43-		أير	X86=		
	PIRST PRESE	NTATION OF MU	LTIPLE OF	PENDENT	CLAIM		-			OR			
• #	the entry in return	nn 1 is less than the	anter in est-	nn 2 wite 5	Of the sect		L	+145=		OR	+290=		
-1	the "Highest Nurs	noer Previously Pal	d For IN THE	S SPACE b	less that	20, enter "20."	A	TOTAL DOTT. FEE		OR A	TOTAL DOIT, FEE	150	
		nter Previously Paid ber Previously Paid					tour	d in the app	ropriate box	in colu	mn 1.	I	

PORM PTO-075 (Mex. 1003)

Passer and Transmitte Office, U.S. DEPARTMENT OF COMMERCE